

Field _____

County _____

Field Office Address _____

MONTHLY PRODUCER’S REPORT

Month _____ 20 _____

Company _____

Address _____

Federal, State, or Indian Lease Number or Lessor's Name if Fee Lease	Well No.	State Permit No.	Status (code)	Code - Oil (O) Condensate (C)	Actual Bbls. Oil Produced	Bbls. Water Produced	Gas Produced MCF	Days Produced	Disposition of Gas - MCF				Disposition of Oil - Bbls.					
									Sold	Other		Pur- chaser Code	Oil on Hand Beg. of Month	Bbls. to Transporter	Other		Pur- chaser Code	Oil on Hand End of Month
											Code					Code		

STATUS CODE

F - Flowing
P - Pumping
G - Gas Lift
S - Shut In
T - Temp. Abandoned
I - Injection

"OTHER" GAS DISPOSITION CODE

G - Gas Lift
L - Lost (MCF Estimated)
E - Explanation Attached
R - Repressuring or Pressure Maintenance
U - Used on Lease
V - Vented

"OTHER" OIL DISPOSITION CODE

C - Circulating Oil
L - Lost
S - Sedimentation (BS&W)
E - Explanation Attached

I hereby certify that the information given is true and complete to the best of my knowledge.

Signature _____ Date _____

Position _____

PURCHASER CODE

Code Name
OIL: 105 - Giant Industries, Inc.
 107 - Meridian Oil Co.
 108 - Gary-Williams Energy Corp.
GAS: 204 - Western Gas Resources, Inc.

Mail completed form by the 25th day of the month following production to:

Oil and Gas Administrator
Arizona Geological Survey
416 W. Congress #100
Tucson AZ 85701-1315

STATE OF ARIZONA
OIL & GAS CONSERVATION COMMISSION

Monthly Producer's Report
File One Copy